FORM D  SEP 2 5 2003  THOMSON FINANCIAL  FORM D  NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D  SEC 2 4 2003  SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549  FORM D  SEC USE ONLY Prefix  Securities  SEC USE ONLY Prefix  Serial
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NOTICE OF SALE OF SECURITIES 2003  PURSUANT TO REGULATION D  SEC USE ONLY  Prefix Serial
NOTICE OF SALE OF SECURITIES 2003  PURSUANT TO REGULATION D  SEC USE ONLY  Prefix Serial
PURSUANT TO REGULATION D  Prefix Serial  SECTION 4(6), AND OR
PURSUANT TO REGULATION D  Prefix Serial  SECTION 4(6), AND OR
SECTION 4(6), AND/OR Prefix Serial
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPSION DATE RECEIVED
Name of Offering ( check-if-this is an amendment and name has changed, and indicate change.)
Dirig Software, Inc Private Placement of Series E Convertible Preferred Stock
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☐ Rule 506 ☐ Section 4(6) ☐ ULOF
Type of Filing: New Filing Amendment
A. BASIC IDENTIFICATION DATA
1. Enter the information requested about the issuer
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  Dirig Software, Inc.
Address of Executive Offices (Number and Street, City, State, Zip Code) One Indian Head Plaza, 6 <sup>th</sup> Floor, Nashua, NH 03060  (Number and Street, City, State, Zip Code) (603) 889-2777
Address of Principal Business Operations (Number and Street, City, State, Zip Code)  (if different from Executive Offices)  Telephone Number (Including Area Code)
Brief Description of Business To provide production proven e-business performance solutions
Type of Business Organization
□ business trust □ limited partnership, to be formed
Actual or Estimated Date of Incorporation or Organization:  Month Year  Actual Or Estimated  Actual Or Estimated
Actual or Estimated Date of Incorporation or Organization:  Oldaria   Oldaria   Oldaria   Estimated  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

## GENERAL INSTRUCTIONS

## Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

CN for Canada; FN for other foreign jurisdiction)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

## State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

Tite.		A. BASIC IDENT	IFICA	TION DATA				
2. Enter the information re	quested for the follo		HICE	TON DATA	<u> </u>	· · · · · · · · · · · · · · · · · · ·		<u> </u>
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;</li> </ul>								
<ul> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> <li>Each general and managing partner of partnership issuers.</li> </ul>								
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Executive Officer	Ø	Director		General and/or Managing Partner
Full Name (Last name first, it Davis, Jeremy M.	findividual)							
Business or Residence Addre c/o Dirig Software, Inc., On						-		
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	×	Executive Officer	$\boxtimes$	Director		General and/or Managing Partner
Full Name (Last name first LaFrance, Paul J.	st, if individual)							
Business or Residence Addre c/o Dirig Software, Inc., On								
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	×	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, in Hill, Joseph D.	findividual)				•			
Business or Residence Addre c/o Dirig Software, Inc., On								
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		Executive Officer	$\boxtimes$	Director		General and/or Managing Partner
Full Name (Last name first, in Margolis, Paul A.	findividual)							
Business or Residence Addre c/o Longworth Venture Par			althan	n, MA 02451	·			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Executive Officer	⊠	Director		General and/or Managing Partner
Full Name (Last name first, in Woloson, Bradford D.	findividual)			_				
Business or Residence Addre c/o JMI Equity Fund, 1119								
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Executive Officer	Ø	Director		General and/or Managing Partner
Full Name (Last name first, in Tabors, R. David							_	
Business or Residence Addre c/o Dirig Software, Inc., On								
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		Executive Officer	⊠	Director		General and/or Managing Partner
Full Name (Last name first, in Fox, Andrew	findividual)							
Business or Residence Addre c/o iConverse, 71 Second Av	•							

			IFICATION DATA					
<ul> <li>Enter the information requested for the following:</li> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;</li> <li>Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and</li> <li>Each general and managing partner of partnership issuers.</li> </ul>								
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner			
Full Name (Last name first, i Cloos, Thomas	f individual)							
Business or Residence Addre 11338 Charlotte View Drive								
Check Box(es) that Apply:	Promoter	□ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner			
Full Name (Last name fir Cook, Jon	st, if individual)							
Business or Residence Addre c/o Dirig Software, Inc., On								
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner			
Full Name (Last name first, i Genesis Capital III, LLC	f individual)							
Business or Residence Addre 2456 Lafayette Road, Ports		eet, City, State, Zip Code)						
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner			
Full Name (Last name first, i Brightman, Thomas B.	f individual)							
Business or Residence Addre P.O. Box 14810 Las Manan								
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner			
Full Name (Last name first, i Americanfreeway Limited)								
Business or Residence Addre c/o Jada Investments, Inc.,			. 33487					
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner			
Full Name (Last name first, i Longworth Venture Partne	rs, L.P.							
Business or Residence Addre 1050 Winter Street, Suite 2								
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner			
Full Name (Last name first, i JMI Equity Fund IV, L.P.	f individual)							
Business or Residence Addre 1119 St. Paul Street, Baltim		eet, City, State, Zip Code)						

			Jerusano pri ngaligi (2)						
		A. BASIC IDENT	IFICATION DATA						
2. Enter the information requested for the following:									
		er has been organized within		10% or more of a cla	ss of equity securities of the				
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;									
			orate general and managing p	partners of partnership	issuers; and				
• Each general and m	Promoter	Beneficial Owner	☐ Executive Officer	Director	Consent and/an				
Check Box(es) that Apply:	Promoter	M Belieficial Owlier	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full Name (Last name first, i JMI Euro Equity Fund IV,									
Business or Residence Addre 1119 St. Paul Street, Baltim		reet, City, State, Zip Code)							
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name fir Cabletron	st, if individual)								
Business or Residence Addre c/o Dirig Software, Inc., On			Λ.	,					
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full Name (Last name first, i Battery Ventures VI, L.P.	f individual)								
Business or Residence Addre 20 William Street, Suite 200			***************************************						
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, i Aprisma Holding, Inc.	f individual)			····					
Business or Residence Addre 273 Corporate Drive, Ports		reet, City, State, Zip Code)							
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner				
Full Name (Last name first, i	f individual)								
Business or Residence Addre	ss (Number and Str	reet, City, State, Zip Code)							
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner				
Full Name (Last name first, i	f individual)								
Business or Residence Addre	ess (Number and Str	reet, City, State, Zip Code)							
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner				
Full Name (Last name first, i	f individual)								
Business or Residence Addre	ess (Number and Str	reet, City, State, Zip Code)							

					В.	INFORMA	TION ABO	UT OFFER	ING	ing the state of t			ne ( ) y dia di kacamatan kacamatan kacamatan kacamatan kacamatan kacamatan kacamatan kacamatan kacamatan kacam Kacamatan kacamatan
1.										Yes No			
Answer also in Appendix, Column 2, if filing under ULOE.													
2.	What is	the minimu	m investm	ent that will	be accepted	d from any i	individual?		•••••				N/A Yes No
3.	Does th	e offering p	ermit joint	ownership o	of a single u	nit?							🗵 🗆
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Full N/A		ast name fi	rst, if indiv	idual)							-		
Bus	iness or I	Residence A	ddress (Nu	imber and S	treet, City,	State, Zip C	ode)			<u></u>			
Nan	ne of Ass	ociated Bro	ker or Dea	ler									1
Stat	es in Wh	ich Person I	isted Has	Solicited or	Intends to S	Solicit Purch	nasers						
	(Check [AL] [IL] [MT] [RI]	"All States" [AK] [IN] [NE] [SC]	or check i [AZ] [IA] [NV] [SD]	ndividual St [AR] [KS] [NH] [TN]	(CA) [CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	. All States [ID] [MO] [PA] [PR]
Full	Name (I	ast name fi	rst, if indiv	idual)							-		
Bus	iness or I	Residence A	ddress (Nu	ımber and S	treet, City,	State, Zip C	ode)						
Nan	ne of Ass	sociated Bro	ker or Dea	ler									
Stat	es in Wh	ich Person I	isted Has	Solicited or	Intends to S	Solicit Purch	nasers						
	(Check [AL] [IL] [MT] [RI]	"All States" [AK] [IN] [NE] [SC]	or check i [AZ] [IA] [NV] [SD]	ndividual Si [AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	All States [ID] [MO] [PA] [PR]
Full	Name (I	ast name fi	rst, if indiv	idual)									
Business or Residence Address (Number and Street, City, State, Zip Code)													
Nan	ne of Ass	sociated Bro	ker or Dea	ler									
Stat	es in Wh	ich Person I	isted Has	Solicited or	Intends to S	Solicit Purch	nasers						
	(Check [AL] [IL] [MT] [RI]	"All States" [AK] [IN] [NE] [SC]	or check i [AZ] [IA] [NV] [SD]	ndividual So [AR] [KS] [NH] [TN]	(CA) [CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	All States [ID] [MO] [PA] [PR]

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box $\square$ and		
	indicate in the columns below the amounts of the securities offered for exchange and already exchanged.  Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$0	\$0
	Equity - Units of Series E Convertible Preferred Stock	\$2,574,661.41	\$1,249,999.43
	☐ Common ☑ Preferred		<del> </del>
	Convertible Securities (including warrants)	\$0	\$ <u>0</u>
	Partnership Interests	\$0	\$0
	Other (Specify)	\$0	\$0
	Total	\$ <u>2,574.661.41</u>	\$1,249,999.43
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indi-cate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	6	\$ <u>1.249,999.43</u>
	Non-accredited Investors	0	\$ <u>0</u>
	Total (for filings under Rule 504 only)		\$ <u>0</u>
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	N/A	\$0
	Regulation A	N/A	\$0
	Rule 504	N/A	\$0
	Total	N/A	\$0
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$ <u>75,000.00</u>
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total	$\boxtimes$	\$ <u>75,000.00</u>

b. Enter the difference be total expenses furnished proceeds to the issuer."	n response to Part C -	Question 4.a.	This difference i	s the "adjusted gross	3		\$ <u>2,499.66</u>	5 <u>1.41</u>
Indicate below the amount of the purposes shown. It to the left of the estimate issuer set forth in response.	f the amount for any  e. The total of the pa	purpose is not k syments listed n	nown, furnish a	n estimate and chec	k the bo	X		
						Payment Officer Directors Affiliat	rs, s, & Paym	nents To
Salaries and fees		••••			🗆	\$	\$	
Purchase of real estat	e		***********************		🗆	\$	\$	
Purchase, rental or le	asing and installation	of machinery an	d equipment			\$	\$	
Construction or leasi	ng of plant buildings a	and facilities			🗆	\$	\$	·
Acquisition of other may be used in excha	ousinesses (including inge for the assets or s	the value of securities of another	urities involved ther issuer pursu	in this offering that ant to a merger)	🗆	\$	□ \$	
Renayment of indebt	edness				M	\$		
• •						\$		
• .						\$	_	
	47 1				_	\$ <u>0</u>	<b>⋈</b> \$ <u>2,499</u>	<u>),661.41</u>
Total Payments Liste	d (column totals adde	a)				<b>⊠</b> \$ <u>2,499.6</u>	<u>561.41</u>	
		D. F	EDERAL SIG	NATURE				
The issuer has duly caused following signature constitut quest of its staff, the information	this notice to be tes an undertaking ion furnished by the i	sster to any non	undersigned do to furnish to -accredited inve	uly authorized pers the U.S. Securition estor pursuant to par	agraph (	b)(2) of Rule 502	filed under Rule 50, mission, upon writte 2.	5, the
Issuer (Print or Type) Dirig Software, Inc.		Signature	re,	2	Date Sept	ember <u>22</u> , 2003	3	
Name of Signer (Print or Typ Jeremy M. Davis	e)		r (Print or Type Chief Executive					
		,						
		<del></del>	ATTENTION	v ——		<u> </u>		_

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

C.: OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS